



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: David L. Brock and Woojin Lee

Application No.: 10/008,457

Group: 3732

Filed: November 16, 2001

Examiner: Philigene, Pedro

Confirmation No.: 5179

For: SURGICAL INSTRUMENT

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
11/3/03	Pamela Sarno
Date	Signature
Pamela Sarno	
Typed or printed name of person signing certificate	

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

[ ] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[ X ] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)	(COL. 2)	(COL. 3)	(COL. 4)	(COL. 5)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	61	MINUS	* 32	29
INDEP	11	MINUS	** 4	7
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

\* not fewer than 20  
\*\* not fewer than 3

SMALL ENTITY	
RATE	ADDIT. FEE
X \$ 9	\$ 261
X \$43	\$ 301
+ \$145	\$

TOTAL = \$ 562

OTHER THAN SMALL ENTITY	
RATE	ADDIT. FEE
X \$18	\$
X \$86	\$
+ \$290	\$

TOTAL = \$ 0

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Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [            ] month Extension of Time	\$	<u>          </u>
<input type="checkbox"/>	Amendment Fee	\$	<u>          </u>
<input type="checkbox"/>	Other Fees:		
		\$	<u>          </u>
		\$	<u>          </u>
	TOTAL:	\$	<u>          0          </u>

A check is enclosed in payment of the following fees:

<input checked="" type="checkbox"/>	Petition for two month Extension of Time	\$	<u>      210      </u>
<input checked="" type="checkbox"/>	Amendment Fee	\$	<u>      562      </u>
<input checked="" type="checkbox"/>	Other Fees:		
	Supplemental Information Disclosure Statement	\$	<u>      180      </u>
		\$	<u>                  </u>
	TOTAL:	\$	<u>      952      </u>

☒ A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Carol M. Fleming  
 Caroline M. Fleming  
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Concord, Massachusetts 01742-9133

Dated: 11/3/03